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PTO/SB/22 (10-08)

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| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2009</b><br>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  |  | <b>Docket Number (Optional)</b><br>03108/0201123-US0  |  |
| <b>Application Number</b> 10/814,777-Conf. #4938  |  | <b>Filed</b> March 30, 2004   |  |
| <b>For</b> BETA-CARBOLINE DERIVED GUANIDINE ALKALOIDS, TIRUCHENDURAMINE   |  |   |  |
| <b>Art Unit</b> 1625  |  | <b>Examiner</b> R. J. Desai   |  |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |  |   |  |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |  |   |  |
|   |  | <u>Fee</u>  | <u>Small Entity Fee</u>                |
| <input type="checkbox"/>  | One month (37 CFR 1.17(a)(1))  | \$130   | \$65                                   |
| <input type="checkbox"/>  | Two months (37 CFR 1.17(a)(2))   | \$490   | \$245                                  |
| <input checked="" type="checkbox"/>   | Three months (37 CFR 1.17(a)(3))   | \$1110  | \$555                                  |
| <input type="checkbox"/>  | Four months (37 CFR 1.17(a)(4))  | \$1730  | \$865                                  |
| <input type="checkbox"/>  | Five months (37 CFR 1.17(a)(5))  | \$2350  | \$1175                                 |
| <input type="checkbox"/>  | Applicant claims small entity status. See 37 CFR 1.27.   |   |  |
| <input type="checkbox"/>  | A check in the amount of the fee is enclosed.  |   |  |
| <input type="checkbox"/>  | Payment by credit card. Form PTO-2038 is attached.   |   |  |
| <input checked="" type="checkbox"/>   | The Director has already been authorized to charge fees in this application to a Deposit Account.  |   |  |
| <input checked="" type="checkbox"/>   | The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-0100 |   |  |
| <b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.               |  |   |  |
| I am the  | <input type="checkbox"/>   | applicant/inventor.   |  |
|   | <input type="checkbox"/>   | assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). |  |
|   | <input checked="" type="checkbox"/>  | attorney or agent of record. Registration Number 60,968   |  |
|   | <input type="checkbox"/>   | attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34                                      |  |
|   | Signature <u>Joshua S. Marcus</u>  |   | Date <u>March 25, 2009</u>             |
|   | Typed or printed name <u>Joshua S. Marcus</u>  |   | Telephone Number <u>(212) 527-7700</u> |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |  |   |  |
| <input type="checkbox"/>  | Total of 1 forms are submitted.  |   |  |

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